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TOTAL AMOUNT OF PAYMENT

Co	omplete if Known	
Application Number	_	FEB 0 5 200
Filing Date	Februrary 11, 1999	10 0 2 200
First Named Inventor	John C. Anderson	Group 2110
Examiner Name	Debbie M. Lee	
Group Art Unit	2177	
Attorney Docket No.	TESTP0101US	

The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Name Name Renner, Otto, Boisselle, & Sklar
Renner, Otto, Boisselle, & Sklar
Recount Number Nu
Deposit Account Name Renner, Otto, Boisselle, & Sklar 127 50 227 25 Surcharge - tate imgree or cover sheet 127 50 227 25 Surcharge - tate imgree or cover sheet 128 139 130 Non-English specification 139 130 Non-English specification 147 2.520 147 2.520 For filing a request for ex parte reexamination 147 2.520 147 2.520 For filing a request for ex parte reexamination 147 2.520 147 2.520 For filing a request for ex parte reexamination 147 2.520 147 2.520 For filing a request for ex parte reexamination 147 2.520 147 2.520 For filing a request for ex parte reexamination 147 2.520 147 2.520 For filing a request for ex parte reexamination 148 2.520 For filing a request for ex parte reexamination 148 2.520 For filing a request for ex parte reexamination 148 2.520 For filing a request for ex parte reexamination 148 2.520 For filing a request for ex parte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for exparte reexamination 149 2.520 For filing a request for expart reexamination 149 2.520 For filing a request for expart reexamination 149 2.520 For filing a request for expart reexamination 149 2.520 For filing a request for expart reexamination 149 2.520 For filing a request for expart reexamination 149 2.520 For filing a request for expart reexamination 149 2.520 For filing a request for expart reexamination 149 2.520 For filing a req
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Under 37 CFR 1.16 and 1.17 Applicant claims small entity status. See 37 CFR 1.27 2. Payment Enclosed: Check Credit card Order Other FEE CALCULATION 1. BASIC FILING FEE Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description Code (\$) Code (\$) 101 710 201 355 Utility filing fee 106 320 206 160 Design filing fee 107 490 207 245 Plant filing fee 108 710 208 355 Reissue filing fee 114 150 214 75 Provisional filing fee 115 110 240 55 Petition to revive - unavoidable SUBTOTAL (1) (\$) 2. EXTRA CLAIM FEES Fee from Lextra Claims Long Fee Paid Total Claims Multiple Dependent Total Claims Total Claims Total Claims Multiple Dependent Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description Code (\$) 115 110 215 55 Extension for reply within first month 116 390 216 195 Extension for reply within fourth month 118 1,390 218 95 Extension for reply within fourth month 119 310 219 155 Notice of Appeal 120 310 220 155 Filing a brief in support of an appeal 121 270 221 135 Request for oral hearing 138 1,510 138 1,510 Petition to revive - unavoidable 121 1,240 241 620 Petition to revive - unintentional 122 1,240 25 Design issue fee (or reissue) 123 50 123 50 Petitions related to provisional applications 126 240 126 240 Submission of Information Disclosure Stmt
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Total Claims 21 -20** = 1 x 9.00 = 9.00 144 600 244 300 Plant issue fee
Claims /
Multiple Dependent = 169.00 123 50 123 50 Petitions related to provisional applications 126 240 126 240 Submission of Information Disclosure Stmt
Large Entity Court Entity
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Large Entity Small Entity Fee Fee Fee Fee Oescription Code (\$) Code (\$) 581 40 581 40 Recording each patent assignment per property (times number of properties)
103 18 203 9 Claims in excess of 20 146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))
102 80 202 40 Independent claims in excess of 3 149 710 249 355 For each additional invention to be 270 204 135 Multiple dependent claim, if not paid examined (37 CFR § 1.129(b))
109 80 209 40 ** Reissue independent claims over original patent over original patent
110 18 210 9 ** Reissue claims in excess of 20 and over original patent 169 900 169 900 Request for expedited examination of a design application
(\$) 169.00 Other fee (specify)
**or number previously paid, if greater; For Reissues, see above Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 460.00
Complete (if applicable)

SUBMITTED BY

Name (Printl Type)

Cynthia S. Murphy

Registration No. (Altomey/Agent)

Signature

Complete (It applicable)

Tetephone (216)621-1113

Date December 5, 2001

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